Please type a plus sign inside this box	<b>⊥</b>	TO/SB/01 (12/97) Ap	Approv use through 09/30/00, OMB 0651-0032					
PEDECLARATI	ON FOR UTILITY	OR Attorn	ney Docket Number	11983.0082				
MATEN	DESIGN F APPLICATION T CFR 1.63)	First 1	Named Inventor	DeNies, et al				
MAY 1 & 2001 BATEN	7 CFR 1.63)		COMPLETE IF KNOWN					
Description		Applio	cation Number	09/817,683				
☐ Declaration Submitted OI	Declarat  Submitte	ion d after Initial Filing	Date	March 26, 2001				
with Initial Filing	Filing (s	•	Art Unit					
1 milg	required		iner Name					
As a below named inventor,	I hereby declare that	:						
My residence, post office add	lress, and citizenship ar	e as stated below next to my	y name.					
I believe I am the original, fin names are listed below) of the	rst and sole inventor (if e subject matter which i	only one name is listed belos claimed and for which a p	ow) or an original, fir	st and joint inventor (if plural invention entitled:				
	DEVICE AND ME	THOD FOR NETWORK C	COMMUNICATION					
the specification of which is attached hereto OR		(Title of the Invention)						
■ was filed on (MM/D	D/YYYY) 03.	/26/2001 as United St	tates Application Num	ber or PCT International				
Application Number	09/817,683 and	was amended on (MM/DD	D/YYYY)	(if applicable).				
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.								
I acknowledge the duty to disc	close information which	is material to patentability	as defined in 37 CFR	1.56.				
I hereby claim foreign priority certificate, or 365(a) of any P America, listed below and hav certificate, or of any PCT into	CT international applicate of the control of the co	ation which designated at le	ast one country other foreign application for	than the United States of patent or inventor's				
Prior Foreign Application (Numbers)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO				
	-							

				Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
Application Number(s)	F	iling Date (MM/DD/YYYY	Y)	
☐ Additional foreign applic  I hereby claim the benefit under 3	<del></del>	isted on a supplemental price any United States provision	· · · · · · · · · · · · · · · · · · ·	<del></del>
			0	
(Numbers)	Country	(MIM/DD/YYYY)	Not Claimed	YES NO

## DECLARATION – Utility or Design Parnt Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.												
U.S. Parent Application or PCT Parent Number					Parent Filing Date (MM/DD/YYYY)				Parent Patent Number (if applicable)			
	09/057,681				:	(	04/09/1998					
Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.												
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:												
☐ Customer Number  OR  Registered practitioner's name/registration number listed below					<b>→</b>				Nui	ace Customer nber Bar Code Label Here		
- Registered	a praeddoner 3 n	:	adon numbe			1	<del>.</del>				-	
	Name			Registr Num	<b>I</b>				Registration Number			
Ranjan Martin Kevin	R. Kent Roberts 40,786 Ranjana Kadle 40,041 Martin G. Linihan 24,926 Kevin D. McCarthy 35,278 David L. Principe 39,336				John Del Vecchio Michael F. Scalise Patrick J. Tracy Daniel C. Oliverio Edwin T. Bean, Jr.				34,92 42,18 33,43	42,475 34,920 42,187 33,435 16,639		
□Additional	registered practi	itioner(s) nai	med on supp	lemental Registe	ered Practition	ner Infor	mation sheet P	ro/sb/0	2C attached he	ereto		
□ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto  Direct all correspondence to: □ Customer Number or Bar Code Label □ OR □ Correspondence address below												
Name	R. Kent Roberts											
Address	Hodgson, R	tuss, Andı	ews, Wo	ods & Goody	ear LLP							
Address	One M&T l	Plaza, Sui	te 2000								12.0	
City	Buffalo	State New					New York		ZIP	14203-2391	<u>,, -, -, -, -, -, -, -, -, -, -, -, -, -</u>	
Country	United State	tes Telephone			(716) 856-4000 Fax				Fax	(716) 849-0349		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.												
Name of S	ole or First l	Inventor:			☐ A pet:	ition ha	s been filed	for thi	s unsigned	inventor		
Given Name (first and middle [if any])  Family Name or Surname												
Steven G. DeNies												
Inventor's Signature									Date	4-9-01		
Residence: City East Aurora St			State	New	York	Country		USA	Citizenship	USA		
Post Office Address												
Post Office Address 2490 West Blood Road												
City East Aurora State			New '	New York ZIP 14052			1052	Country	USA			
■ Additional inventors are being named on the _1_ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.												
								_				

## **DECLARATION**

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 3 of 3

Name of Additional Jo	int Inventor, if any:		[	□ A pet	ition has bee	en filed for this u	nsigned invento	or	
Given Nar		Family Name or Surname							
	Robert								
Inventor's Signature	Shit	Addan-					Date	4-9-01	
Residence: City	Williamsville	State	New	York Country USA		Citizenship	USA		
Post Office Address									
Post Office Address	355 North Forest Road								
City	Williamsville	State New York ZIP 14221			14221	Country	USA		
Name of Additional Joint Inventor, if any:									
Given Nan	ne (first and middle [if a	ny])				Family Name of	or Surname		
Inventor's Signature	Date								
Residence: City	State				Country		Citizenship		
Post Office Address									
Post Office Address									
City		State			ZIP		Country		
Name of Additional Joint Inventor, if any:									
Given Name (first and middle [if any])				Family Name or Surname					
Inventor's Signature	Date								
Residence: City		State			Country		Citizenship		
Post Office Address									
Post Office Address									
City	State ZIP Country								